Title of Investigation

FWR2014XXXXH

1. Principal Investigator

Name/Rank/Title, Organization/Office Symbol, Phone Number, Email address, contractor affiliation if applicable

2. Associate Investigators

- a. Name/Rank/Title, Organization/Office Symbol, Phone Number, Email address, contractor affiliation if applicable, brief description of role in the study
- b. Name/Rank/Title, Organization/Office Symbol, Phone Number, Email address, contractor affiliation if applicable, brief description of role in the study
- c. Name/Rank/Title, Organization/Office Symbol, Phone Number, Email address, contractor affiliation if applicable, brief description of role in the study

3. Research Monitor

Name/Rank/Title, Organization/Office Symbol, Phone Number, Email address

4. Facility/Contractor

Start here...do not indent paragraphs...space between each paragraph Funding: ... name your funder and the award amount

5. Conflicts of Interest

State "None" or provide description of conflict. Include any financial interests, duty position conflicts (e.g., Investigator and Program Manager in same study), along with plan to manage such conflict in this study.

6. Objective

Start here...do not indent paragraphs...space between each paragraph

7. Background

Extensive and detailed literature review that serves as the foundation for your research. Start here...do not indent paragraphs...space between each paragraph

8. Impact

Start here...do not indent paragraphs...space between each paragraph

9. Experimental Plan

a. <u>Equipment</u>:

Please note, if you are using a device that could fall under FDA device regulations, supply discussion of FDA status and supporting FDA documentation. Also include the manufacturer's specifications as an attachment. Discuss whether the device is being used within the manufacturer's specifications.

Start here...do not indent paragraphs...space between each paragraph

b. Subjects:

Include the number of subjects included and how that number is determined (e.g., power analysis, literature review, expert consensus, pilot testing results).

Start here...do not indent paragraphs...space between each paragraph

c. Duration:

Duration of overall protocol as well as duration of subjects direct involvement, please include details (i.e., number of blood draws, number of days/hours, etc).

Start here...do not indent paragraphs...space between each paragraph

d. Description of experiment, data collection, and analysis:

Detailed methodology. If multiple sub-experiments, discuss in detail each experiment. Start here...do not indent paragraphs...space between each paragraph

i. If conducting surveys, questionnaires, interviews, reference AFI 38-501, Air Force Survey Program. If applicable AF survey office documentation must be submitted. (Reference below, attachment C)

e. Safety monitoring:

Start here...do not indent paragraphs...space between each paragraph

f. Confidentiality protection:

Include a data handling plan (e.g., how long is the data maintained, where it is maintained, who has access to the data, what securities are in place, and destruction methods). Any intended future use of the data should be clearly specified. Please include if/how the data will be shared with other entities as well as data sharing agreements. Start here...do not indent paragraphs...space between each paragraph

9. Risk Analysis

Detailed risk analysis with mitigation plan and supporting references. Please note, if you are using a device that could fall under FDA device regulations, please include risk assessment of device.

Start here...do not indent paragraphs...space between each paragraph

10. References

- a. Reference
- b. Reference
- c. Reference

11. Attachments (If applicable, include as attachments. If not, delete a-e).

- a. Informed Consent Document
- b. Curriculum Vitae of investigators (Appropriate to experience/education)
- c. Questionnaires or surveys (if applicable)
- d. Subject recruiting materials (if applicable)

any other support	ve document	iation.		
		Title of Inve		

e. Other attachments if applicable, such as: letters of collaborative support (data use

agreements, CRADA, etc), IND/IDE supportive documents, contractor assurances, and

REQUEST FOR AIR FORCE SURVEY CONTROL NUMBER

Please provide the information requested below to apply for a Survey Control Number (SCN). SCNs are required by AFI 38-501 (formerly AFI 36-2601) to survey AF AD, Guard, Reserve and civilian employees.

<u>Survey</u>				
Title:				
Purpose:				
Justification:				
Who will receive results:				
Projected use of results:	_Inform leadership _	Policy Change _	POM/APOM _	Other
Does sponsor have authorit	y to implement chang	es in all areas surve	yed?Yes	No
Is the survey anonymous?	Yes	_No		
Is the survey voluntary?	Yes	_No		
Survey Population				
Total # of Officers:				
Total # of Enlisted:				
Total # of Civilians:				
Total # of Contractors:				
Total of other population				
(spouse, retiree, etc):				
Total # of target population	:			
Data Collection Metho	od (please check al	l that apply)		
Web based survey				
Hosted on:mil _	orgcom	edu	Other	
Web Link address: http://_				
Name of Contractor (if any)) :			
Cost of contract \$				
Mail-out survey:	e-mail	_postal mail		
Personal interview				
Telephone interview				
Other (please specif	fy):			
A 3				
Administration timeling	<u>1e</u>	Cumyay End data		
Survey Start date: Re-occurring survey:	No Voc. Ar	Survey End date:	ual Quartarly	
Maret arrayare data.		ınuarSenii-ann	uaiQuarterly	
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Points of Contact

A 3-letter or above sponsor from HQ USAF (Pentagon HAF or SAF) is required for all surveys.

Rank and Name of AF Level Sponsor (must be 3-letter or above):
AF Sponsor Office Symbol:
AF Sponsor Email:
AF Sponsor Phone:
Rank and Name of Action Officer (A/O):
A/O Email:
A/O Phone:

Please **attach a copy** of your survey to this completed document and email your Survey Control Number request to: <u>af.surveys@randolph.af.mil</u>. Requests are date/time stamped and worked in order received. The AF Survey Office can be reached by phone at DSN 487-4773. Please refer to AFI 38-501 (formerly AFI 36-2601) for more information on the Air Force Survey Program.

** ADVISORY ** Please ensure compliance to the following guidance, as applicable.

Non .Mil Survey Administration: IAW AFI 33-129, all websites hosted in the commercial environment (i.e. .com, .org, etc), require SAF/XC approval. Send this document with the survey to safscio.networkdivi@pentagon.af.mil to request a waiver from AFI 33-129 requirements.

Labor Relations and Union Notification: IAW AFI 64-106, surveys administered to bargaining unit civilians require Labor Relations approval. Send the Survey Control Number request and survey to AFPC/DPIEC Program Mgmt & Eval Branch or alfredo.carrillo@randolph.af.mil; DSN 665-5737.

Protection of Human Subjects in Research: Surveys that constitute research with human subjects require review in accordance with AFI 40-402, Title 32 Code of Federal Regulations (CFR), Sec 219; and, when applicable, 45 CFR 46, Subparts B-D, 21 CFR 50, 56, 312, and 812; DoDD 3216.02; and 10 USC 980.

Privacy Act of 1974: Title 5 United States Code (USC) Sec 552a; Title 10 USC; Sec 55 and 8013; Executive Order 9397 and Air Force Instruction 33-332, Privacy Act Program.

Freedom of Information Act (FOIA): Title 5 United States Code (USC), Sec 552; DoD Regulation 5400.7/Air Force Supplement; Executive Order 13392; Air Force Instruction 33-129 and 33-324.

Operational Security : DoD Regulation 5200.1-R; AFPD 31-4; and Air Force Instruction 10-701.